



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/663,098
		Filing Date	September 15, 2003
		First Named Inventor	Tsvika Kurts
		Art Unit	2185
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission		Attorney Docket Number	42P17694

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<div style="border: 1px solid black; padding: 5px;">- copy of 1 cited reference - return postcard</div>
<input checked="" type="checkbox"/> PTO/SB/08	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Gregory D. Caldwell, Reg. No. 39,926  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 15, 2004

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Annie G. Pearson
Signature	
Date	March 15, 2004



# FEE TRANSMITTAL for FY 2004

Effective 01/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$)

## Complete If Known

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Art Unit	2185
Attorney Docket No.	42P17694

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None  
 Deposit Account

Deposit Account Number 02-2666

Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)		(\$)			

### 2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		20**	= <input type="text"/> X <input type="text"/> = <input type="text"/>	
		3	= <input type="text"/> X <input type="text"/> = <input type="text"/>	

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple Dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)		(\$)			

\*\*or number previously paid, if greater. For Reissues, see below

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051 65 Surcharge - late filing fee or oath	
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
1804	920*	1804 920 * Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840 * Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	420	2252 210 Extension for reply within second month	
1253	950	2253 475 Extension for reply within third month	
1254	1,480	2254 740 Extension for reply within fourth month	
1255	1,210	2255 605 Extension for reply within fifth month	
1404	330	2401 165 Notice of Appeal	
1402	330	2402 165 Filing a brief in support of an appeal	
1403	290	2403 145 Request for oral hearing	
1451	1,510	2451 1,510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive - unavoidable	
1453	1,330	2453 665 Petition to revive - unintentional	
1501	1,330	2501 665 Utility issue fee (or reissue)	
1502	480	2502 240 Design issue fee	
1503	640	2503 320 Plant issue fee	
1460	130	2460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
1809	770	1809 385 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810 385 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801 385 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other fee (specify)			
SUBTOTAL (3)			

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

Complete (if applicable)

Name (Print/Type)	Gregory D. Caldwell	Registration No. (Attorney/Agent)	39,926	Telephone	(503) 684-6200
Signature				Date	03/15/04



Docket No.: 42P17694

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

TSVIKA KURTS, ET AL.

Application No.: 10/663,098

Filed: September 15, 2003

For: **Over-Clocking Detection**

Art Group: 2185

Examiner: Not Yet Assigned

**INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed for applications filed after June 30, 2003). This IDS and IDS Citation Form are being submitted before the mailing of a first Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

Please charge any fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

**BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP**

Gregory D. Caldwell, Reg. No. 39,926

Date: March 15, 2004

12400 Wilshire Boulevard, 7th Floor  
Los Angeles, CA 90025  
Telephone: (503) 684-6200

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Annie G. Pearson 03-15-04  
Annie G. Pearson Date



<p style="text-align: center;"><b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i></p>				<b>Complete If Known</b>	
<b>Sheet</b>	1	<b>of</b>	1	<b>Application Number</b>	10/663,098
				<b>Filing Date</b>	September 15, 2003
				<b>First Named Inventor</b>	Tsvika Kurts
				<b>Art Unit</b>	2185
				<b>Examiner Name</b>	Not Yet Assigned
				<b>Attorney Docket Number</b>	42P17694

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

**(use as many sheets as necessary)**

Sheet

1

***Complete If Known***

Application Number	10/663,098
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Attorney Docket Number	42P17694

## **U.S. PATENT DOCUMENTS**

## **FOREIGN PATENT DOCUMENTS**

Examiner Signature		Date Considered	
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\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication.

<sup>1</sup>Applicant's unique citation designation number (optional). \*See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. \*Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). \*For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. \*Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. \*Applicant is to place a check mark here if English language Translation is attached.

Based on PTO/SB/08A (08-03) as modified by Blakely, Solokoff, Taylor & Zafman (win) 08/11/2003

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